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Office Use Only



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W23-98438



July 18, 2023

MICHAEL CASSIDY 24724 HARBOUR VIEW DR. PONTE VEDRA BEACH, FL 32082 US

SUBJECT: M-THREE VENTURES, LLC

Ref. Number: W23000098438

We have received your document for M-THREE VENTURES, LLC and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Complete document is needed, please send all pages.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 323A00015986

Ariel Jones Regulatory Specialist II

www.sunbiz.org

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COVER LETTER

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	stration Sectio				
SUBJECT:	M THDEE V	ENTURES, LLC			
SUBJECT:		Name of corporation	n - must include suffix		
Dear Sir or M	1adam:				
"Certificate o	of Existence," (by Foreign Corporation fo or "Certificate of Good Sta orporation to transact busin	inding" and check are sub-		
Please return	all correspond	lence concerning this matte	er to the following:		
Michael Cassi	idy				
		Name o	f Person		
M-THREE VI	ENTURES, LLO	2			
		Firm/Co	mpany		
24724 Harbou	ır View Dr.				
		Add	ress		
Ponte Vedra I	Beach, FL 32082	2			
		City/State	and Zip code		
michaelcassid	y@gmail.com				
	[:-mail address: (to be used	for future annual report n	otification)	
For further in	formation con	cerning this matter, please	call:		
Michael Cassi	idy	at (⁶⁴⁶	221-7138		
Nam	ne of Person	Area Co	de Daytime Telepl	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			Registration S Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314	
	heck payable to:	following amount: FLORIDA DEPARTMEN \$78.75 Filing Fee & Certificate of Status	T OF STATE \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

M-THREE VEN	TURES, LLC		
(Enter name of co	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavaila	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting bus	iness in Florida)
2. Delaware	3 7	532184	
(State or country 06/21/2023	y under the law of which it is incorporated)	(FEI number, if applicat	
4	of incorporation) 5	(Date of duration, if other than perpetual)	
6 24724 Harbour V	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502) iew Dr., Ponte Vedra Beach, FL 32082		
7	(Principal office	street address)	2023 J SECR
8. Name and stree	(Current mailing et address of Florida registered agent: (P.O.	address, if different) Box NOT acceptable)	2023 JUL 31 PH SECRETARY
Name:	Michael Cassidy	_	2: 38
Office Address:	24724 Harbour View Dr.,		co co
	Ponte Vedra Beach	, Florida 32082(Zip code)	
	(City)	(Zip code)	
designated in this further agree to co	ed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes related with and accept the obligations of my positions.	nt as registered agent and agree to ative to the proper and complete per	act in this capacity. I
_	(Registered agent's sign	nature)	

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to

A. DIRECTORS □Chairman □ Chairman Name: □ Vice Chairman Address: _____ ☐ Vice Chairman Address: □ Director □Director Michael Cassidy President President □Vice President ☐ Vice President □ Treasurer □ Secretary Other _____ □Other _____ Other ___ □Other ____ Name: _____ □ Chairman Name: ☐ Chairman Address: □Vice Chairman Address: □Vice Chairman Director □ Director ☐ President President □ Vice President □ Vice President □ Secretary □ Treasurer □ Secretary ☐Treasurer □Other _____ ☐ Other _____ Other _____ □Other _____ Chairman Name: _____ Name: _____ □Chairmaл □Vice Chairman □Vice Chairman Address: Address: ☐ Director Director ☐ President □President ☐ Vice President □Vice President _ □ Secretary □Treasurer □ Treasurer □ Secretary □Other Other Other □Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 12. Michael Cassidy (Jun 76, 2023 17 24 MDT) Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Michael Cassidy / Founder & President (Typed or printed name and capacity of person signing application)



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "M-THREE VENTURES, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE TWENTY-SIXTH DAY OF JUNE, A.D. 2023.

at coro delaware gov/auth

Authentication: 203628270

Date: 06-26-23